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PTO/SB/83 (08-00)

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/648,581 🗸	
Filing Date	August 25, 2000	
First Named Inventor	BIRCH	
Group Art Unit	unassigned	
Examiner Name	unassigned 🔭	
Attorney Docket Number	2610 C	<u>N.</u>

To: Assistant Commissioner for Patents Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

This application has been transferred to another law firm pursuant to our client's request.

The correspondence address is NOT affected by this willidrawal.								
2. X Change the correspondence address and direct all future correspondence to:								
Customer Number	CORRESPONDENCE ADDRESS		Place	Place Customer Number				
OR			Bar (Code Lab	el here			
Firm or Individual Name	Christensen, O'Connor, Johnson & Kindness							
Address	1420 Fifth Avenue							
Address	Suite 2800							
City	Seattle	State	WA	ZIP	98101	, ,		
Country	USA							
Telephone	206-682-8100	Fax	206-224-0779					
This request is enclosed in triplicate.								
Name Ro	Roger D. Wylie Reg. No. 36,974							
Signature								
Date	Oct 27, 2100				-			
NOTE: Withdrawal is effective	when approved rather than when received	l						

address is NOT affected by this withdrawal

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.